

# F97000005993

## TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: Compscript Mobile Inc. (Formerly Delta Pharmacy Inc.)  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Garv Solain	x)	200002134642--2
(Name of Person)		-04/07/97--01014--002
Compscript Mobile Inc.		*****70.00 *****70.00
(Firm/Company)		Transact Business in
1225 Broken Sound Pkwy NW Suite A		200002134642--2
(Address)		-10/27/97--01025--001
Boca Raton, FL 33487-3514		***1165.00 ***1165.00
(City/State/Zip)		

127-1434

Should you need to call someone concerning this matter, please call:

Garv Solain	at (	561	)	994-8585
(Name of Person)				(Area Code & Daytime Telephone Number)

### COURIER ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

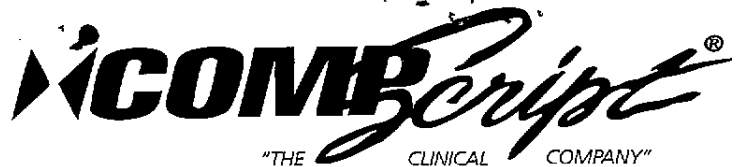
### MAILING ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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September 22, 1997



Mr. Lee Rivers, Document Examiner  
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: CompScript - Mobile Incorporated  
Letter No. 297A00042752  
Ref. No. W97000007351

Dear Mr. Rivers:

In response to your letter dated August 25, 1997, please read the affidavit below:

This is to certify that the original application by a foreign corporation had incorrect and misleading information.

CompScript-Mobile, Inc. has not transacted business in Florida since January 1, 1994. Delta Pharmacy was the original company incorporated and was transacting business in Florida since January 1, 1994.

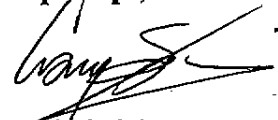
Delta Pharmacy was acquired by CompScript, Inc. on May 31, 1996. Shortly after the acquisition, the corporate name was changed from Delta Pharmacy to CompScript-Mobile, Inc. since ownership and management changed.

The branch manager incorrectly completed the application by showing the date the facility started doing business, and not showing the correct date of June 1, 1996 when the corporation CompScript-Mobile started doing business.

I apologize for the confusion, and hope this clarifies the matter.

Sincerely,

CompScript, Inc.

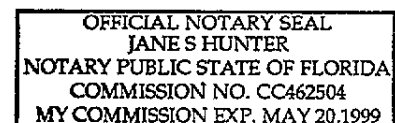
  
Gary C. Splain  
Comptroller

GCS:jsh

Subscribed and Sworn to before me  
this 22nd day of September, 1997.

  
Jane S. Hunter, Notary Public

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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Combscript-Mobile, Inc.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Delaware 3. 59-324 8505  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. June 4, 1994 5.   
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. June 1, 1996  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 1225 Broken Sound Pkwy NW Suite A  
Boca Raton, FL 33487  
(Current mailing address)

8. Institutional Pharmacy  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

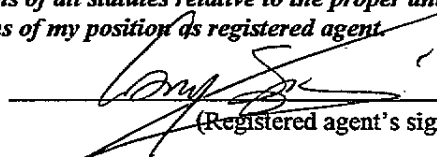
**9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)**

Name: Gary Spain

Office Address: 6160 Via Tierra  
Boca Raton, Florida, 33433-2301  
(Zip code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

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**A. DIRECTORS (Street address only - P.O. Box NOT acceptable)**

Chairman: Brian A. Kahan

Address: 1225 Broken Sound Pkwy NW Suite A  
Boca Raton, FL 33487

Director: Rob Gardner

Address: 1225 Broken Sound Pkwy NW Suite A  
Boca Raton, FL 33487

Director: Malcolm Leonard

Address: 3810 Hollywood Blvd.  
Hollywood, FL 33021-6730

Director: Paul Heimberg

Address: 7015 Beracasa Way  
Boca Raton, FL 33433

**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**

President: /CEO Brian A. Kahan

Address: 1225 Broken Sound Pkwy NW Suite A  
Boca Raton, FL 33487

Vice President: Rob Gardner

Address: 1225 Broken Sound Pkwy NW Suite A  
Boca Raton, FL 33487

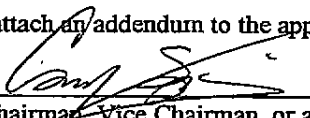
Secretary: Gary Splain

Address: 1225 Broken Sound Pkwy NW Suite A  
Boca Raton, FL 33487

Treasurer: Gary Splain

Address: 1225 Broken Sound Pkwy NW Suite A  
Boca Raton, FL 33487

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  Secretary Kahan  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Gary SPLAIN SEC / TREAS  
(Typed or printed name and capacity of person signing application)

*State of Delaware*  
*Office of the Secretary of State*

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COMPScript-MOBILE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF NOVEMBER, A.D. 1997. — — — — —

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DIVISION OF CORPORATIONS  
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Edward J. Freel, Secretary of State

AUTHENTICATION:

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DATE: 8741282

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